

STATE OF NEW HAMPSHIRE 2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

i. Name of Lobbyisu	<u> </u>			
II. Name of Lobbyist's	s partnership, firm or corpor	cation, if any:		
•	GC	GLAW REALTY	, LLC	
			5, Concord, NH 03301	
603-228-	1181	603-228-8396	dietel@ge	cglaw.com
(Telepho	one)	(Fax)	(En	nail)
	vers: (Choose one – file sepa nsactions which are not attri		ach client, OR you may file a se client.)	a separate report for
☐ All reportable tra	nsactions occurring in the mor	nth prior to the rep	orting date relative to the follo	wing client.
	(Full Name of Client as it a	ppears on the Lobb	oyist Registration Form)	
OR All reportable tra		uding the lobbyist	's family), or the lobbying firm	n listed below which ar
IV. Date of Report: Reports cover: act	April 30, 2025 □ tivity from date of registration	to 3/31/25	July 30, 2025 2 activity from 4/1/25 to 6/3	
	October 29, 2025		January 28, 2026	5
6	activity from 7/1/25 to 9/30/25		activity from 10/1/25 to 12	
	fees received and no reporta complete just this form and sub-		made since the last report. ary of State's Office, State Hou	□ use, Room 204,
VI. Check if additions	al reports are attached:			
☐ If you have receive	ed fees or made expenditures, y	ou must file Adde	endum A – Fees and Expenses	S
☐ If you have paid an Expense Reimbursement		penses, you must i	Tile Addendum B – Report of	Honorariums or
If you, your firm, o	r your family has made politic	al contributions, y	ou must file Addendum C - H	Political Contributions
Sworn Statement/Affir I have read RSA 15, RS to the best of my knowled	A 15-B and RSA 664 and here	eby swear or affirm	that the foregoing information	on is true and complete
(Signature of Lobbyis	Vitu,		$\frac{7/27/35}{\text{(Date)}}$	
Robert J. Dietel, Share (Print Name of lobbyis				



STATE OF NEW HAMPSHIRE Lobbyists Report of Political Contributions Addendum C

I. Name of Lobbyist's partnership, firm or corporation, if any:				
	(Name of partnership, fi	rm or corporation)		
III. Name of Client		Date	JULY 30, 2025	
	on that is reportable pursuant firm, indicate the following:	to RSA Chapter 664	paid on behalf of the	
Full name of candidate:		PEARL		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 250	0.00 Office Candidate	is SeekingSEN	JATE	
actual cost of the in-kind contrenter an estimated value and the	ibution on the line above for amore word "estimate." MARK McCONKEY FO		If the actual cost is not known,	
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 50	0.00 Office Candidate is Seekin	g <u>SENATE</u>		
	d contribution, provide a descript ibution on the line above for amous word "estimate."			
· · · · · · · · · · · · · · · · · · ·				
Full name of candidate:	DAVID ROCHE			
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 250	0.00 Office Candidate is Seeking	gSEN	IATE	
		(tur	n over to continue →)	

		.	
// d			
(If more than three c	ontributions were made, report addition	nal contributions on separate ad	dendum C forms.)
Sworn Statemer	t/Affirmation by Lobbyist		
	15, RSA 15-B and RSA 664 ar ete to the best of my knowledg	_	that the foregoing information
	1. July		1/19/25-
(Signature of lob	aviet)		(Date)

-

ŗ`

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C

I. Name of Lobbyist(s)				
II. Name of lobbyist's partnership, firm or corporation, if any:				
	GGCLAW	REALTY, LLC		
	(Name of partners	ship, firm or corporation)		
III. Name of Client		Dat	e JULY 30, 2025	
Political Contributions For each political contribution client/lobbyist and lobbying			4 paid on behalf of the	
Full name of candidate: <u>KA</u>	REN LIOIT HILL FOR (Last Name)	R EXECUTIVE COUNCE (First Name)	L DISTRICT 2 (Middle Name/Initial)	
Amount of Contribution \$ 250	.00 Office Can	didate is SeekingEX	ECUTIVE COUNCIL	
If the contribution is an in-kind actual cost of the in-kind contrienter an estimated value and the	bution on the line above fe word "estimate."	or amount of contribution.	If the actual cost is not known,	
Full name of candidate:	KELLY FOR NEV (Last Name)	V HAMPSHIRE (First Name)	(Middle Name/Initial)	
	,	,	,	
Amount of Contribution \$ 2.00 If the contribution is an in-kind actual cost of the in-kind contrienter an estimated value and the	contribution, provide a d bution on the line above f	Candidate is SeekingGO escription of the goods or se or amount of contribution.	rvices provided, and enter the	
Full name of candidate:	KEVIN AVARD F	OR SENATE (First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 250	.00 Office Candidate is S	,		

If the contribution is an in-kind contribution, provide a description of the actual cost of the in-kind contribution on the line above for amount of coenter an estimated value and the word "estimate."	e goods or services provided, and enter the ontribution. If the actual cost is not known,
(If more than three contributions were made, report additional contributions on s	eparate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or is true and complete to the best of my knowledge and belief.	r affirm that the foregoing information
(Sint SIN)	7/29/JT
(Signature of lobbyist)	Mate),
Robert J. Dietel, Shareholder-Director	
(Print Name of Lobbyist)	
	,
	1



STATE OF NEW HAMPSHIRE Lobbyists Report of Political Contributions Addendum C

I. Name of Lobbyist(s)			 	
II. Name of lobbyist's partne	ership, firm or corporatio	n, if any:		
GGCLAW REALTY, LLC				
	(Name of partnersh	nip, firm or corporation)		
III. Name of Client		Dat	e JULY 30, 2025	
Political Contributions For each political contributi client/lobbyist and lobbying			4 paid on behalf of the	
Full name of candidate:	FRIENDS OF DAN	INNIS		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 250	0.00 Office Cand	idate is Seeking SEN	NATE	
Full name of candidate:				
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 25	0.00 Office Candidate is S	eeking <u>SENATE</u>		
If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	ibution on the line above fo		ervices provided, and enter the If the actual cost is not known,	
Full name of candidate:	FRIENDS OF VICO	OTORIA SULLIVAN (First Name)	(Middle Name/Initial)	
Amount of Contribution \$ 250	0.00 Office Candidate is So	eeking SENATE		

(turn over to continue →) If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
(if more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) $\frac{1/29/25}{(Date)}$
(Signature of lobbyist) / (Date)
Robert J. Dietel, Shareholder-Director
(Print Name of Lobbyist)

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C

I. Name of Lobbyist(s)			
II. Name of lobbyist's partners	hip, firm or corporation, if an	y:	
	GGCLAW REAL	ΓY, LLC	
	(Name of partnership, firm	or corporation)	
III. Name of Client		Date	JULY 30, 2025
Political Contributions For each political contribution client/lobbyist and lobbying fi	• •	RSA Chapter 664 p	aid on behalf of the
Full name of candidate:	FRIENDS OF SHARON ((Last Name)	CARSON (First Name)	(Middle Name/Initial)
Amount of Contribution \$ 1,000	,	,	,
Full name of candidate:			0.010 27 7 7 7 7
Amount of Contribution \$ 500.00	(Last Name) Office Candidate is Seeking	(First Name)	(Middle Name/Initial)
If the contribution is an in-kind coactual cost of the in-kind contribuenter an estimated value and the v	ontribution, provide a description on the line above for amou	n of the goods or servi	
			(
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of Contribution \$	· · · ·	,	,
	OINVO CANGIGATO IO OCCANIG		ver to continue →)

			or services provided, and enter the on. If the actual cost is not know
enter an estimated value an		amount of controut	on. If the actual cost is not know
			-
			
(If more than three contribution	ons were made, report additional con	tributions on separate a	ddendum C forms.)
		-	
Sworn Statement/Affir	mation by Lobbyist		
I have read RSA 15, RSA	A 15-B and RSA 664 and here	ebv swear or affirm	that the foregoing information
	he best of my knowledge and		·
	()//1		1 1
Vat 1	Xitu		7/29/20
(Signature of lobbyist)			' (Date)'
	a.		
Robert J. Dietel, Shareho	older-Director		•
(Print Name of Lobbyist			
	<i>'</i>		